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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	VIP-101	
	First Named Inventor	Keegan F. O'Neill	
	COMPLETE IF KNOWN		
	Application Number		
Declaration Submitted OR With Initial Filing Submitted after Initial Filing (37 CFR 1.16 (e)) required)	Filing Date		
	Group Art Unit		
	Examiner Name		

As a below named inventor, I he	reby declare that:				
My residence, mailing address, ar	d citizenship are as sta	ited below next to my nar	ne.		
I believe I am the original, first and names are listed below) of the sub	I sole inventor (if only o oject matter which is cla	ne name is listed below) simed and for which a pal	or an original, firstent is sought on	st and joint inventor (if plur the invention entitled:	al
REMOTE DESKI	OP INTERFA	CE			
the are sife at an after high	(°	Title of the Invention)			
the specification of which					
is attached hereto		15- 4 10		N	,
was filed on (MM/DD/YYYY)		as United S	tates Application	Number or PCT Internatio	nai
,				(if applicab	le).
Application Number	and was a	amended on (MM/DD/YY	YY)		
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attach YES NO	ed?
NONE			0000	0000	
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.					
Application Number(s)		e (MM/DD/YYYY)			
NONE			numbers supplem	al provisional application are listed on a ental priority data sheet 02B attached hereto.	

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Nu or Bar Code		OR X	Correspondence address below	
Name Morland C. Fischer				
Address 2030 Main Street				
Address Suite 1050				
c ity Irvine		State CA	ZIP 92614	
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR :		A petition has been fil	led for this unsigned inventor	
Given Name (first and middle [if any]) Keegan	F.	Family Name or Surname	O'Neill	
Inventor's Haldan Olliel Date 04/10/01				
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NAME OF SECOND INVENTOR:		A petition has been fil	led for this unsigned inventor	
Given Name (first and middle [if any]) Joseph Family Name or Surname Supple				
Inventor's Signature			Date 09/10/01	
Residence: City Victoria	State ^I	B.C. CANADA Country	Ireland Citizenship	
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	sh Columbia	V8L 5E9	CANADA Country	
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page ___ of ___

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname			mame	
Timothy A.	Perkins					
Inventor's Signature Date 04/10/01				Date 04 / 10 / 01		
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Inventor's Signature					Date	
Residence: City	State	State Country			Citizenship	
Mailing Address						
Mailing Address						
City	State		ZIP	Cour	ntry	
Name of Additional Joint Inventor, if any:						
Given Name (first and middle [if any]) Family Name or St		r Surname				
Inventor's Signature Date			Date			
Residence: City State			Country		Citizenship	
Mailing Address						
Mailing Address						
City	State	-	ZIP	Co	untry	

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